

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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Alison Lundergan Grimes

Kentucky Secretary of State Received and Filed: 8/21/2013 12:00 AM Fee Receipt: \$90.00

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Authority (Foreign Business Enti	ty)		FBE
Pursuant to the provisions of KRS 14A and KRS 271B, 273, 274,275, 362 and 386 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:				
1. The entity is a : profit corporation (KRS 271B). nonprofit corporation (KRS 273). professional service corporation (KRS 274). professional limited liability company (KRS 275). limited partnership (KRS 362).				
2. The name of the entity is Church Development Services, LLC (The name must be identical to the name on record with the Secretary of State.)				
3. The name of the entity to be used in Kentucky is (if applicable): (Only provide if "real name" is unavailable for use; otherwise, leave blank.)				
4. The state or country under whose law the entity is organized is Virginia				
5. The date of organization is 5/17/06 and the period of duration is			(if left blank, the period of duration	
6. The mailing address of the entity's pr	incipal office is			is considered perpetual.)
708 S. Rosemont Road, Su		Virginia Beach	VA	23452
Street Address		City	State	Zip Gode
7. The street address of the entity's registered office in Kentucky is				
828 Lane Allen Road Ste. 219		Lexington	KY	40504
Street Address (No P.O. Box Numbers)		City	State	Zip Code
and the name of the registered agent at that office is InCorp Services, Inc.				
8. The names and business addresses	of the entity's representatives (secretar	y, officers and directors, ma	nagers, trustees	or general partners);
	708 S. Rosemont Rd #101		VA	23452
Name	Street or P.O. Box	City	State	Zìp Code
Kurt W. Werth	708 S. Rosemont Rd #101	Virginia Beach	VA	23452
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
 If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation. 				
10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable:				
12. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is				
1/ 74.744				(Delayed effective date and/or time)
Signature of Authorized Representative	Kurt Kurt	W. Werth, CFO Printed Name & Title		3/20/13 Date
Type/Print Name of Registered Agent				
Khimtup Wh. Heather Nee For Incorp Services, Inc./Authorized Person 8-20-13				
Signature of Registered Agent (01/12)	Printed Name	/ Title	, '	Date